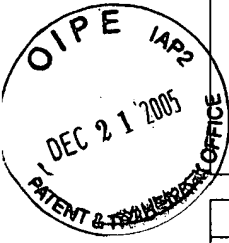


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IPW 1635

EXPRESS MAIL NO. EV718205220US



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|---|----------------------|--------------------|
| TRANSMITTAL FORM (To be used for all correspondence after initial filing) | Application Number | 09/431,594 |
| | Filing Date | November 1, 1999 |
| | First Named Inventor | Jeffery J. Wheeler |
| | Art Unit | 1635 |
| | Examiner Name | Jane J. Zara |
| | Attorney Docket No. | 480208.425C2 |

| ENCLOSURES (check all that apply) | | |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Supplemental Response <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Declaration (executed) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement and Transmittal <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below): _____ _____ _____ |
| Remarks | | |

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|--|---|----------|---------------------------------|
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| Signature | | | |
| Printed Name | Carol D. Laherty, Ph.D. | | |
| Date | December 21, 2005 | Reg. No. | 51,909 |

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